

**Testimony before the Appropriations Committee
February 23, 2017
Marc DeGregorio, North Haven**

**Department of Mental Health and Addiction Services (DMHAS)
and Housing budget**

Governor's H.B. 7027 AN ACT CONCERNING THE STATE BUDGET FOR THE
BIENNIUM ENDING JUNE THIRTIETH 2019, AND MAKING APPROPRIATIONS
THEREFORE

Good afternoon Senators Osten and Formica, Representative Walker and
members of the Appropriations Committee.

My name is Marc DeGregorio and I am a registered voter in North Haven.

I am writing to you to testify in strong opposition to Governor's proposed biennial
budget, especially regarding the Department of Mental Health and Addiction
Services (DMHAS). As a parent of 3 adopted former DCF foster children and a
NAMI Family-to-Family facilitator, I can attest to the difficulties and challenges I
have faced, and families I teach face every day, with family members who have
mental health conditions.

I adopted my girls 25 years ago and we were challenged right from the start. I can
tell you that we were able to access many more services and help because we
were connected to the public insurance system, rather than my private insurance.
And still, many times it wasn't enough. My oldest daughter is still on Medicaid
and Medicare insurance as she has challenging impairments and having to live in
a skilled nursing facility. There are many more individuals in these facilities that
are dealing with mental health issues, and that may need the medical and other
help provided in a skilled facility.

And then there are individuals who don't need to be in skilled nursing facilities
but who do need some help in order to live well in the community. And several of
those community based services are in jeopardy through proposed cuts. Proposed
cuts include legal services in DMHAS (for CT Legal Rights Project); Regional Mental

Health Boards; mental health, substance use and employment services; young adult services and community based services. Not having access to those services will likely contribute to people ending up in high cost settings like emergency rooms, hospitals or even skilled nursing facilities.

At one time (fourteen years ago) my middle daughter was homeless due to her mental illness. We kept trying to access housing and were told to wait and wait. Eventually, we were able to connect her to a nonprofit agency in Branford. But they didn't have housing. We ended up buying a condominium to make sure she had a home and wasn't living on the street. Things in housing have changed since then. Connecticut is a leader in the efforts to end and prevent homelessness. Thus, I ask you that you continue the investment in housing subsidies, services and supports, both in the DMHAS as well as in the Department of Housing (DOH) budget. These are crucial commitments to our family members, friends, colleagues and neighbors. And they pay off – saving money in crisis health care and other sectors. But we cannot forget that in order to live well in the community, individuals need the other services and supports as well – including the ones being proposed for drastic cuts, once again.

Oftentimes, people with mental health conditions seem to be invisible to the greater society – until the state budget is released. Then they rise to the front of the line for proposed cuts to services and help. They pay for mistakes and misjudgments of past administrations and the lopsided conversation about corporate tax cuts and welfare. These budget challenges were not brought on by individuals with health conditions who need state services and supports in order to live decent lives in our communities. This budget seems to take, again, from those who can least afford it.

Plus, all of these cuts will end up costing the state more, both in monies and human lives.

Please consider this in your deliberations. Thank you for this opportunity to express my opinion.

Respectfully, Marc DeGregorio